ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | TT | 1112 | 8/15/01 |
| RESPONSE FORMALITY REVIEW | LC | 1024 | 03-6-02 |
| | | 1091 | 5/7/02 |

## INDEX OF CLAIMS

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| ✓ | ....................... Rejected | N | ................... Non-elected |
| = | ....................... Allowed | I | ................... Interference |
| – | (Through numeral)... Canceled | A | ................... Appeal |
| ÷ | ....................... Restricted | O | ................... Objected |

| Claim Final | Original | Date | | Claim Final | Original | Date | | Claim Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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